## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#716707** 

FILED Feb 14, 2007 Secretary of State

Entity Name: EDUCATIONAL OPPORTUNITIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5725 IMPERIAL LAKES BLVD. MULBERRY, FL 33860 **Current Mailing Address: New Mailing Address:** % ROBERT S. BOLT, ESQ. PO BOX 3287 TAMPA, FL 336013287 US FEI Number: 59-1269611 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOLT, ROBERT S 601 BAYSHORE BOULEVARD SUITE 700 TAMPA, FL 33606 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WHITE. WOODIE W Name: Name: 3996 MADISON MAIN NW Address: Address: City-St-Zip: KENNESAW, GA 30144 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DUNCAN, ROBERT J REV Name: Address: 5725 IMPERIAL LAKES BOULEVARD Address: City-St-Zip: MULBERRY, FL 33860 US City-St-Zip: Title: () Delete Title: () Change () Addition GROVE, WILLIAM B BSHP Name: Name: 109 MCDAVID LANE Address: Address: City-St-Zip: CHARLESTON, WV 25311 US City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: KNOX, JAMES L BSHP Name: 6909 MARTIN LUTHER KING, JR. ST SO #444 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33705 US City-St-Zip: Title: () Delete Title: () Change () Addition MORGAN, ROBERT C BSHP Name: Name: 1295 MALIBU PLACE Address: Address: City-St-Zip: BIRMINGHAM, AL 35216 US City-St-Zip: Title: () Delete Title: () Change () Addition FANNIN. ROBERT E BSHP Name: Name: Address: 2065 ATHENIA WAY Address: LAKELAND, FL 33813 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J DUNCAN P 02/14/2007